

09/20/2005 TUE 20:34 FAX

RECEIVED
CENTRAL FAX CENTER

4002/032

SEP 20 2005

PTO/SB/22 (8-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) BP0002-US																														
<table border="1"> <tr> <td colspan="3">In re Application of Coull et al.</td> </tr> <tr> <td colspan="2">Application Number 09/996,658</td> <td>Filed 11/29/01</td> </tr> <tr> <td colspan="3">For Methods and Compositions for Sorting and/or Determining Organisms</td> </tr> <tr> <td>Group Art Unit 1634</td> <td>Examiner Bradley L. Sisson</td> <td>Express Mail No.</td> </tr> </table>			In re Application of Coull et al.			Application Number 09/996,658		Filed 11/29/01	For Methods and Compositions for Sorting and/or Determining Organisms			Group Art Unit 1634	Examiner Bradley L. Sisson	Express Mail No.																		
In re Application of Coull et al.																																
Application Number 09/996,658		Filed 11/29/01																														
For Methods and Compositions for Sorting and/or Determining Organisms																																
Group Art Unit 1634	Examiner Bradley L. Sisson	Express Mail No.																														
<p>This is a request under the provisions of 37 CFR § 1.136(a) to extend the period for filing a response in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr> <td><input type="checkbox"/></td> <td>One month (37 CFR 1.17(a)(1)) (120)</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Two months (37 CFR 1.17(a)(2)) (450)</td> <td>\$ 450.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Three months (37 CFR 1.17(a)(3)) (1020)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Four months (37 CFR 1.17(a)(4)) (1590)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Five months (37 CFR 1.17(a)(5)) (2160)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>A check in the amount of the fee is enclosed.</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Payment by credit card. Form PTO-2038 is attached.</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No <u>01-2213</u>. I have enclosed a duplicate copy of this sheet.</td> <td></td> </tr> </table> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p><u>Sep 20, 2005</u> Date</p> <p><u>Brian D. Gildea</u> Signature</p> <p>Brian D. Gildea 39,995 Typed or printed name Reg. No.</p>			<input type="checkbox"/>	One month (37 CFR 1.17(a)(1)) (120)	\$ _____	<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2)) (450)	\$ 450.00	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3)) (1020)	\$ _____	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4)) (1590)	\$ _____	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5)) (2160)	\$ _____	<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.		<input type="checkbox"/>	A check in the amount of the fee is enclosed.		<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		<input type="checkbox"/>	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No <u>01-2213</u> . I have enclosed a duplicate copy of this sheet.	
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1)) (120)	\$ _____																														
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2)) (450)	\$ 450.00																														
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3)) (1020)	\$ _____																														
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4)) (1590)	\$ _____																														
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5)) (2160)	\$ _____																														
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.																															
<input type="checkbox"/>	A check in the amount of the fee is enclosed.																															
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.																															
<input type="checkbox"/>	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.																															
<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No <u>01-2213</u> . I have enclosed a duplicate copy of this sheet.																															

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450. 94778_1.DOC

PAGE 2/32 * RCVD AT 9/20/2005 8:26:24 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-6/32 * DNIS:2738300 * CSID: * DURATION (mm:ss):08:02

09/21/2005 EAREGAY1 00000048 012213 09996658

01 FC:1252

450.00 DA

09/20/2005 TUE 20:34 FAX

RECEIVED
CENTRAL FAX CENTER

SEP 20 2005

4003/032

PTO/SB/22 (8-00)
Approved for use through 10/31/2002. OMB 0651-0031U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) BP0002-US																														
In re Application of Coull et al.																																
Application Number 09/996,658		Filed 11/29/01																														
For Methods and Compositions for Sorting and/or Determining Organisms																																
Group Art Unit 1634	Examiner Bradley L. Sisson	Express Mail No.																														
<p>This is a request under the provisions of 37 CFR § 1.136(a) to extend the period for filing a response in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr><td><input type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1)) (120)</td><td>\$ _____</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2)) (450)</td><td>\$ 450.00</td></tr> <tr><td><input type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3)) (1020)</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4)) (1590)</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5)) (2160)</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/></td><td>Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>A check in the amount of the fee is enclosed.</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Payment by credit card. Form PTO-2038 is attached.</td><td></td></tr> <tr><td><input type="checkbox"/></td><td>The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</td><td></td></tr> <tr><td><input checked="" type="checkbox"/></td><td>The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>01-2213</u>. I have enclosed a duplicate copy of this sheet.</td><td></td></tr> </table> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p><u>Sep 20, 2005</u> Date</p> <p><u>Brian D. Gildea</u> Signature</p> <p>Brian D. Gildea _____ 39,995 Typed or printed name Reg. No.</p>			<input type="checkbox"/>	One month (37 CFR 1.17(a)(1)) (120)	\$ _____	<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2)) (450)	\$ 450.00	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3)) (1020)	\$ _____	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4)) (1590)	\$ _____	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5)) (2160)	\$ _____	<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____		<input type="checkbox"/>	A check in the amount of the fee is enclosed.		<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		<input type="checkbox"/>	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>01-2213</u> . I have enclosed a duplicate copy of this sheet.	
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1)) (120)	\$ _____																														
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2)) (450)	\$ 450.00																														
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3)) (1020)	\$ _____																														
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4)) (1590)	\$ _____																														
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5)) (2160)	\$ _____																														
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____																															
<input type="checkbox"/>	A check in the amount of the fee is enclosed.																															
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.																															
<input type="checkbox"/>	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.																															
<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>01-2213</u> . I have enclosed a duplicate copy of this sheet.																															

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450. 94778_1.DOC